

CHAPTER 13 PLAN
UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF MISSISSIPPI

Debtor: Henri Pegues SSN: XXX-XX-8759 CASE NO. 15-01437
 Joint Debtor: Stephanie Pegues SSN: XXX-XX-5710 Median Income: Above Below
 Address: 111 Los Pueblos Drive
Clinton, MS 39056

THIS PLAN DOES NOT ALLOW CLAIMS. Creditors must file a proof of claim to be paid under any plan that may be confirmed. The treatment of ALL secured and priority debts must be provided for in this plan.

PAYMENT AND LENGTH OF PLAN

The plan period shall be for a period of 60 months, not to be less than 36 months for below median income debtor(s), or less than 60 months for above median income debtor(s).

50/50

(A) Debtor shall pay \$168.05 monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

Brown Bottling Group, Inc
Attn: Payroll
 Post Office Box 3186
 Ridgeland, MS 39158

(B) Co-Debtor shall pay \$723.00 monthly, semi-monthly, weekly, or bi-weekly) to the chapter 13 trustee. Unless otherwise ordered by the Court, an Order directing payment shall be issued to Debtor's employer at the following address:

Singletary & Thrash- Jackson, PA
Attn: Payroll
 129 N. State Street
 Jackson, MS 39201

PRIORITY CREDITORS.

Filed claims which are not disallowed are to be paid in full or as ordered by the Court as follows:

Internal Revenue Service: \$ 16,086.05 at \$ 268.10/month

Mississippi Dept. of Revenue: \$ _____ at \$ _____/month

Other/ _____: \$ _____ at \$ _____/month

DOMESTIC SUPPORT OBLIGATION. DUE TO: _____

POST PETITION OBLIGATION: In the amount of \$ _____ per month beginning _____
 To be paid direct, through payroll deduction, or through the plan.

PRE-PETITION ARREARAGE: In the total amount of \$ _____ through _____ which shall be paid in the amount of \$ _____ per month beginning _____.
 To be paid direct, through payroll deduction, or through the plan.

HOME MORTGAGES. All claims secured by real property which are to be paid through the plan shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed herein, subject to the start date for the continuing monthly mortgage payment proposed herein.

Mtg pmts to Wells Fargo Mortgage Beginning 6/1/15 @ \$ 637.55 Plan Direct

Mtg arrears to _____ Through _____ \$ _____ @ \$ _____ /mo

Debtor's Initials HP

Joint Debtor's Initials SP

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MORTGAGE CLAIMS TO BE PAID IN FULL OVER PLAN TERM:

Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
 Property Address: _____ Are related taxes and/or insurance escrowed []Yes []No
 Creditor: _____ Approx. amt. due: _____ Int. Rate: _____
 Property Address: _____ Are related taxes and/or insurance escrowed []Yes []No

NON-MORTGAGE SECURED CLAIMS. Creditors that have filed claims that are not disallowed are to retain lien(s) pursuant to 11 U.S.C. § 1325(a)(5)(B)(i)(I) until the payment of the debt determined as under nonbankruptcy law or discharge. Such creditors shall be paid as secured claimants the sum set out below or pursuant to other order of the Court. The portion of the claim not paid as secured shall be treated as a general unsecured claim.

<u>CREDITOR'S NAME</u>	<u>COLLATERAL</u>	<u>910* CLM</u>	<u>APPROX. AMT. OWED</u>	<u>INT. RATE</u>	<u>PAY VALUE OR AMT. OWED</u>
Ally Financial	2012 Nissan Titan	22,134.99	29,600	5%	Amount Owed
Nissan Motor Corp	2012 Nissan Sentra	10,117.23	10,117.23	5%	Amount Owed
Flowers Employee	2003 Ford F-150	5,700.00	5,700.00	5%	Amount Owed
Okinus	Household Goods	2,013.12	500.00	5%	Value
Springleaf	Household Goods	2,310.27	500.00	5%	Value
Tower Loan	Household Goods	2,506.74	500.00	5%	Value
Tower Loan - Ellis	Household Goods	2,037.81	500.00	5%	Value
Tower Loan - Clinton	Household Goods	4,970.91	500.00	5%	Value
United Consumer Fin.	HHG- Vacuum	2,228.15	500.00	5%	Value
First Franklin	Household Goods	1,684.34	500.00	5%	Value
First Heritage	Household Goods	1,227.81	500.00	5%	Value
First Heritage	Household Goods	1,272.45	500.00	5%	Value

* The column for "910 CLM" applies to both motor vehicles and "any other thing of value" as used in the "hanging paragraph" of 11 U.S.C. § 1325

SPECIAL CLAIMANTS including, but not limited to, co-signed debts, abandonment of collateral, direct payments by Debtor, etc. For all abandoned collateral Debtor will pay \$0.00 on the secured portion of the debt. Where the proposal is for payment, creditor must file a proof of claim to receive proposed payment.

<u>CREDITOR'S NAME</u>	<u>COLLATERAL</u>	<u>APPROX. AMT. OWED</u>	<u>PROPOSED TREATMENT</u>
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STUDENT LOANS which are not subject to discharge pursuant to 11 U.S.C. §§ 523(a)(8) and 1328(c) are as follows (such debts shall not be included in the general unsecured total):

<u>CREDITOR'S NAME</u>	<u>APPROX. AMT. OWED</u>	<u>CONTRACTUAL MO. PMT.</u>	<u>PROPOSED TREATMENT</u>
_____	_____	_____	_____
_____	_____	_____	_____

SPECIAL PROVISIONS which may apply to any or all payments to be paid through the plan, including, but not limited to, adequate protection payments:

GENERAL UNSECURED CLAIMS total approximately **\$53,102.26**. Such claims must be **timely filed** and not disallowed to receive payment as follows: _____ IN FULL (100%), _____ 10 % (percent) MINIMUM, or a total distribution of \$ _____, with the Trustee to determine the percentage distribution. Those **general unsecured claims not timely filed shall be paid nothing, absent order of the Court.**

Debtor's Initials HP

Joint Debtor's Initials SP Chapter 13 Plan, Page 2 of 3

Total attorney fee charged: \$ 3,200.00
Attorney fee previously paid: \$ 340.00
Attorney fee to be paid in plan: \$ 2,860.00

The payment of administrative costs and aforementioned attorney fees are to be paid pursuant to Court order and/or local rules.

Automobile Insurance Co/Agent

Attorney for Debtor (Name/Address/Phone/Email)
Tatum & Wade, PLLC
P. O. Box 22688
Jackson, MS 39225-2688

Telephone/Fax: _____

Telephone No. 601-948-7770
Facsimile No. 601-948-7747
Email address bankruptcy@tatumwade.com

DATED: 5/28/15

DEBTOR'S SIGNATURE /S/ Henri Pegues
JOINT DEBTOR'S SIGNATURE _____
ATTORNEY'S SIGNATURE /s/ THANDI WADE